



**Step 1  
Tell Us About Yourself**

Church Organization or Name (if applicable) \_\_\_\_\_

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone 1 (\_\_\_\_) \_\_\_\_\_ Phone 2 (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

**Step 2  
Tickets**

Tickets Needed	Quantity	Cost Per Ticket	Total
\$25 per person		x \$25 =	\$
Child Care Tickets <small>*Call for availability</small>		x \$0 =	\$
Vendor Table \$20 Each		x \$20 =	\$
<b>TOTAL AMOUNTS</b>			\$

**Step 3 — Vendor Tables**

If you would like to be contacted to be considered for a **VENDOR TABLE** place your information here and someone will contact you. Cost is \$20 per Table.

Name \_\_\_\_\_

Vendor of \_\_\_\_\_

Contact Phone Number \_\_\_\_\_

Email \_\_\_\_\_

I am not interested in this \_\_\_\_\_

**Step 4 - Method of Payment**

Choose Your Method of Payment (Do not send Cash)

Payment Amount Enclosed \_\_\_\_\_

Method of Payment \_\_\_\_\_ Check \_\_\_\_\_ Money Order

*Make checks payable to  
South Central East WOP*

**Step 5 — Final Instructions**

1. Address where you are sending your Completed Registration Form.  
  
Gloria Budzowski  
SCE Women of Purpose  
4695 Earl Drive  
Harrisburg, PA 17112
2. Make a copy of this Completed Registration Form for your records.

*Please note the cut-off date for mail in reservations is Wednesday, April 14.*

**Posters, Registration Forms and additional information can be found by going to [www.pennadelwomenofpurpose.org](http://www.pennadelwomenofpurpose.org)**